Please type a plus sign (+) inside this box → 🔒
-------------------------------------------------

Pfease type a plus sign\*(+) inside this box 

PTO/SB/08A (08-00)

Approved for use through 10/31/2002. OMB 0651-0031

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

Substitute for form 1449A/PTO

Sheet

## INFORMATION DISCLOSURE STATEMENT BY APPLICANT

(use as many sheets as necessary)

of

Complete if Known 09/811,957 **Application Number** 03/19/200 Filing Date First Named Inventor Lakhansingh Group Art Unit 2651 **Examiner Name Attorney Docket Number** LAKH100

				U.S. PATENT DOC	JMENTS	
Examiner Initials*	Cite No.1	U.S. Patent	Document Kind Code <sup>2</sup> (if known)	Name of Patentee or Applicant of Cited Document	Date of Publication of Cited Document MM-DD-YYYY	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear
	Α	4713801	l	Hale		
	В	493780		Weitz et al	06/26/90	Pr
	C	5126982	2	Yifrach	06/30/92	TECEIVE
	D	5195065		Kato et al	03/16/93	-1VED
	E	5235568	B	Masauru	08/10/93	MAY 1 -
<u> </u>	F.	5448534		Okada	08/05/95	Took 2001
	G	5568453		Okada	10/22/96	- ~ C//No/nov ~
	Н	5633837		Grant	05/27/97	Sy Center 2002
	Ι	6041023	3	Lakhansingh	3/21/00	Technology Center 2600
			-+-		<del>                                     </del>	
			_			
			-		+ +	
					1	

	FOREIGN PATENT DOCUMENTS										
Examiner Initials*	Cite No.1	Foreign Patent Document			Name of Patentee or	Date of Publication of	Pages, Columns, Lines, Where Relevant	П			
		Offices	Number <sup>4</sup>	Kind Code <sup>s</sup> ( <i>if known</i> )	Applicant of Cited Document	Cited Document MM-DD-YYYY	Passages or Relevant Figures Appear	10			
								<u> </u>			
		ļļ			· · · ·			<u> </u>			
		ļļ						$\perp$			
<b> </b>		igwdown	<del></del>		· · · · · · · · · · · · · · · · · · ·			<b>!</b>			
l i		1 )		1		]					

Examiner	Date	
Signature	Considered	

Burden Hour Statement: This form is estimated to take 2.0 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U. S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.



<sup>\*</sup>EXAMINER: trittal if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant,

<sup>1</sup> Unique citation designation number. 2 See attached Kinds of U.S. Patent Documents. 3 Enter Office that issued the document, by the two-letter code (WIPO Standard ST.3). 4 For Japanese patent documents, the indication of the year of the reign of the Emperor must precede the serial number of the patent document. 5 Kind of document by the appropriate symbols as indicated on the document under WIPO Standard ST. 16 if possible. Applicant is to place a check mark here if English language Translation is attached.



Typed or printed name

Signature

GP 2651

a Thi	sign (+) inside this box		U.S. Patent and Traden	PTO/SB/21 (08-00 ved for use through 10/31/2002. OMB 0651-0031 tark Office: U.S. DEPARTMENT OF COMMERC ion unless it displays a valid OMB control numbe	
			Application Number	09/811,957	RECEIVE ON ON Center 2600
TRA	NSMITT	AL	Filing Date	03/19/2001	147 15 30 C
	<b>FORM</b>		First Named Inventor	Lakhansingh	Opgy Cent 1/1/1
(to be used for all correspondence after initial filing)			Group Art Unit	2651	I Ciller 2600
			Examiner Name		
Total Number of	Pages in This Submiss	sion 2	Attorney Docket Number	LAKH100	)
		ENCL	OSURES (check	ali that apply)	<b>_</b>
Fee Transmittal Form Fee Attached Amendment / Reply After Final Affidavits/dect Extension of Time Re Express Abandonmen X Information Disclosur Certified Copy of Prior Document(s) Response to Missing Incomplete Applicatio Response to Munder 37 CFR	aration(s)  quest  nt Request  re Statement  wity  Parts/ in  lissing Parts	Drawing Licensir Petition Provisio Power of Change Address Termina Reques	to Convert to a and Application of Attorney, Revocation of Correspondence	After Allowance Communication to Group Appeal Communication to Board of Appeals and Interferences Appeal Communication to Group (Appeal Natice, Brief, Repty Brief) Proprietary Information  Status Letter Other Enclosure(s) (please identify below):	
	SIGNATUR	E OF APPLI	CANT, ATTORNEY, OR A	AGENT	
Firm or Individual name	Richard L	. Huff			
Signature Buckard & Huff					
Date	5/9/01		10	-	
		CERTIFICA	ATE OF MAILING		7
I hereby certify that this corresmail in an envelope addresse	spondence is being de ed to: Commissioner for	posited with the	ne United States Postal Servi Shington, DC 20231 on this d	ce with sufficient postage as first class	

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

Date